Late Contribution Report

Type or print in ink. Amounts may be rounded to whole dollars.

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ATE CONTRIBUTION REPORT

NAME OF FILER				Date of		Date Stamp	CALIFO	PNIA 40
Rush Hill for Council 2014				This Filing	10/8/14	2014 OCT -8 PM 2: 3	FOR	
AREA CODE/PHONE NUMBER		I.D. NUMBER (if applicable)			10		For Official Use Only	
949-723-7202 1359628			Report No	12	OFFICE OF		,	
STREET ADDRESS				Amendmer	م م	THE CITY CLERK GITY OF NEWPORT BEACH		
115 22nd St				to Report No. (explain below)		GILY (JE NEVIPORT BEACH		
CITY		STATE ZIPCODE			4			
Newport Beach		CA	92663	No. of Pages	i .			
Late Contribu	tion(s) Received							
DATE RECEIVED	FULL NAME	D ZIP CODE OF CONTRIBU'	TOR	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EM (IF SELF-EMPLOYED, ENTER NAME OF	AMOUNT RECEIVED		
10/8/14	Homer Bludau				IND COM OTH PTY SCC	Retired		1,000 ☐ Check if Loan
					☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC			☐ Check if Loan
					IND COM OTH PTY SCC			☐ Check if Loan
*Contributor Codes IND – Individual COM – Recipient Co OTH – Other	mmittee (other than PTY or		olitical Party mall Contributor Committee					
Reason for Amenda	ment:							
	······································						EDD	C Form 407 (lon/02)